2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 09, 2020
Secretary of State
8089221783CC

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Entity Name: BALANCE CHIROPRACTIC CENTER, INC.

Current Principal Place of Business:

445 STATE RD 13
STE 9
JACKSONVILLE, FL 32259

Current Mailing Address:

445 STATE RD 13
STE 9
JACKSONVILLE, FL 32259 US

FEI Number: 20-1933434

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LYNN, LESLIE A
308 CLEARWATER DRIVE
PONTE VEDRA BEACH , FL 32082 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	P	Title	S
Name	LYNN, LESLIE A	Name	LYNN, LESLIE A
Address	308 CLEARWATER DRIVE	Address	308 CLEARWATER DRIVE
City-State-Zip:	PONTE VEDRA BEACH FL 32082	City-State-Zip:	PONTE VEDRA BEACH FL 32082

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LESLIE A LYNN PRESIDENT 06/09/2020

Electronic Signature of Signing Officer/Director Detail — Date